

RECORD OF OCCUPATIONAL EXPOSURE TO IONIZING RADIATION

FOR INSTRUCTIONS, SEE PAGE 2.

1. IDENTIFICATION NUMBER	2. NAME <i>(Last, first, middle initial)</i>	3. SOCIAL SECURITY NUMBER	4. RANK/RATE TITLE OF POSITION	5. DATE OF BIRTH <i>(Day, month, year)</i>
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[illegible]

16. REMARKS (Continue on additional sheet if necessary)

TO BE RETAINED PERMANENTLY IN INDIVIDUAL'S MEDICAL RECORD

INSTRUCTIONS FOR PREPARATION OF DD FORM 1141

1. Enter file, service, badge, check, or clock number by which individual is currently identified.
2. Enter last name, first name, and middle initial. If the combination of last name and first name exceeds 19 spaces, enter last name and initials only.
3. Enter Social Security number.
4. Enter in not more than 10 spaces, rank, rate, grade, title or position that the individual is currently holding. Use standard service abbreviations, e.g., CAPT; MC; HMCS; HM1; SSGT; LCPL; etc. Abbreviate civilian occupation titles as necessary; e.g., Radiological Physicist to Rad Physic; Radiation Physiologist to Rd Physiol; Electrical Welder to Elec Wldr; etc.
5. Enter date of birth by day, month, and year, e.g., 21 Sep 1918.
6. Enter name of activity or unit.
- 7 and 8. "Period of Exposure." Enter the day, month, and year, e.g. 1 Oct 62.
7. Enter the day, month, and year exposure period began.
8. Enter the day, month, and year exposure period ended.
- 9 through 12. "Dose This Period." Enter radiation dose received this period to three decimal places, e.g., 02.345 rem. All entries shall be made using five digits including zeros as necessary.
9. Enter skin dose (*soft*) which includes low energy gamma and x-ray of less than 20 KEV effective energy and beta radiation. Total skin dose is the visual addition of columns 9 and 12.
10. Enter gamma and x-ray dose greater than 20 KEV effective energy in rem.
11. Enter Neutron dose in rem.
12. Enter sum of items 10 and 11.
13. Add item 12 to previous item 13; enter total in item 13.
14. Enter permissible dose calculated from the age formula $5(N-18)$ rem, where N equals the present age in years.
15. Recorder certify entries by initialing.
16. Enter other pertinent information such as known exposure from deposited radioactive material or from any external radioactive sources. Describe briefly any activity or assignment bearing a potential for exposure and estimate dose-time relationships, if feasible. If this form is used for other than whole body and skin of whole body, specify the use; i.e., hands and forearms, feet and ankles, thyroid, etc. When recorded dose is not obtained from film badge readings, specify whether estimates were obtained from pocket dosimeters, area or air monitoring, bioassay, etc.

NOTE:

This record is required on all individuals who are employed by or are members of the Armed Forces and who have been or are being occupationally exposed to ionizing radiation. It shall be the responsibility of each activity of the Department of Defense having personnel so exposed to initiate and maintain this record in accordance with AR 40-14/BUMEDINST 6150.18 series/AFR 161-8/DSAR 4145.24. (29 Sept. 1966)